- EV318284442

PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032 Please type a plus sign (+) inside this box U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number UTILITY Attorney Docket No. MI22-2271 PATENT APPLICATION First Inventor Janos Fucsko TRANSMITTAL Methods of Etching Silicon Nitride Substantially (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. EV 318284442 US APPLICATION FLEMENTS Assistant Commissioner for Patents ADDRESS TO: Box Patent Application See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) opecification [Total Pages 25 3 X Computer Readable Form (CRF) - Descriptive title of the invention Plus title page b. Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D i. CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, ii. Daper or a computer program listing appendix - Background of the Invention Statements verifying identity of above copies - Brief Summary of the Invention - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS - Detailed Description 9. X Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure (when there is an assignee) Attorney 4. X | Forma1 | Total Sheets 3 English Translation Document (if applicable) 12. X Information Disclosure Copies of IDS 5. Oath or Declaration [Total Pages 3 Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) DELETION OF INVENTOR(S) Certified Copy of Priority Document(s) (if foreign priority is claimed) Signed statement attached deleting inventor(s) med in the prior application, see 37 CFR Request and Certification under 35 U.S.C. 122 1.63(d)(2) and 1.33(b) (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
Check for \$1,330.00; Power of...... Application Data Sheet. See 37 CFR 1.76 17. X Other: Attorney/Certificate by Assignee 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.:_ Examiner Group Art Unit:

Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS 021567 of Customer No. or Attach bar code label here) X Customer Number or Bar Code Label Correspondence address below Name Mark S. Matkin, Reg. 32,268 Wells St. John P.S. Address 601 West First Avenue, Suite 1300 City State Spokane Zip Code 99201-3828

Telephone

509-624-4276

Fax

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under

509-838-3424 Name (Print/Type) Registration No. (Attorney/Agent) 44,854 James E. Lake Signature 18 Sept 03 Date Burden Hour Statement: This form is estimated to take 0.2 hours to combe amount of time you are required to complete this form should be Time will vary depending upon the needs of the individual case. Any comments on

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FEE TRANSMITTAL		o respond to a collection of information unless it displays a valid OMB control number. Complete if Known			
	- 1	Application Number	Unknown		
for FY 2003	ı	Filing Date	Filed Herewith		
Patent fees are subject to annual revision.	[First Named Inventor	Janos Fucsko		
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.		Examiner Name	Unknown		
See 37 C.F.R. §§ 1.27 and 1.28.	⊸i	Group / Art Unit	Unknown		
TOTAL AMOUNT OF PAYMENT (\$)1,330.00		Attorney Docket No.	MI22-2271		
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)			
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METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)							
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Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For fiting a request for reexamination	0.00						
2. X Payment Enclosed:	112 920° 112 920° Requesting publication of SIR prior to Examiner action	0.00						
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FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00						
1. BASIC FILING FEE	116 380 216 190 Extension for reply within second month	0.00						
Large Entity Small Entity	117 870 217 435 Extension for reply within third month	0.00						
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101 690 201 345 Utility hing fee 750.00	119 300 219 150 Notice of Appeal	0.00						
107 480 207 240 Plant filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00						
108 690 208 345 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00						
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00						
01/07/07 At 1/0 750 00	140 110 240 55 Petition to revive - unavoidable							
SUBTOTAL (1) (\$) 750.00	141 1,210 241 605 Petition to revive - unintentional	0.00						
2. EXTRA CLAIM FEES Fee from	142 1,210 242 605 Utility issue fee (or reissue) 143 430 243 215 Design issue fee	0.00						
Extra Claims below Fee Paid		0.00						
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103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3	146 690 246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	0.00						
102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be							
109 78 209 39 ** Reissue Independent claims	examined (37 CFR § 1.129(b))	0.00						
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SUBTOTAL (2) (\$) 540.00 Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00								
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Name (Print/Type)	James E. Lake			Registration No. (Attorney/Agent)	44,854	Telephone	509-624-4276	_
Signature		low	1/nl	·		Date	18 Sep 2003	_
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